AVAILABLE COPY

Г										Application or Docket Number					
		PATENT A	APPLICATIO Effect	N FEE DI	RD	10721937									
		CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
I	TOTAL CLAIMS			20				Г	RATE	FEE	1	RATE	FEE		
╟	FOR			NUMBER FILEO .		NUMBER EXTRA		В	ASIC FE	385.00	OR	Basic FEE	770.00		
I	TO	TAL CHARGEA	y minus 20=		• /			X\$ 9=		OR	X\$18=				
	INDEPENDENT CLAIMS			3 minus 3 =				X43=			ОЯ	X86=			
	MU	LTIPLE DEPEN	DENT CLAIM PI	ESENT				+145=		ОЯ	+290=				
	. 11	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL			
		CLAIMS AS AMENDED - PART II							C84611	ENTITY	00	OTHER SMALL			
	_	(Column 1) (Column 2) (Column Column 2) (Column 2)						_	SMALL	ADDI-	OR	SMALL	ADDI-		
	AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BEA OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL		
		Total	• / 9	Minus	** 6	2.0	=		X\$ 9=		OR	X\$18=	/		
		Independent	. 2	Minus	***	9	- B/	T	X43=		OR	X86=	(K)000		
I		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							÷145=		OR	+290=			
		1 1						L	TOTAL		^	TOTAL ADDIT, FEE	(2000		
	10	20/05 (Column 1) (Column 2) (Column 3)							ODIT. FEE	. B	•	APPIII. FCE	•		
ır			CLAIMS		HIGH	EST		Г	_	ADDI-	1		ADDI-		
	AMENDMENT B		REMAINING . AFTER AMENDMENT		NUM PREVK PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL:		RATE	TIONAL FEE		
		Total	• 19	Minus	** >	20	• /	Г	X\$ 9=		OR	X\$18=			
I		Independent	• 70	Minus		7			X43=		OR	X86=	^ ·/		
Į!	_	FIRST PRESE	NTATION OF MI	JUIPLE DE	ENDENI	CLAIM		T	+145=		ОR	·+290=			
ŀ								AE	TOTAL		OR	TOTAL ADOIT, FEE			
	(Column 1) (Column 2) (Column 3)								•			٠			
	S		CLAIMS REMAINING AFTER AMENDMENT		HIGH NEM PREVIO PAID	BER	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	AMENDMENT	Total	•	Minus	44		•	T	X\$ 9=		OR	X\$18=			
	ME	Independent	•	Minus	980		•	T	X43=		OR	X86=			
L		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=			
		 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 								·	OR	TOTAL			
	_	If the "Highest No	mber Previously Pr	aid For IN TH	SSPACE	is less tha	an 3, enter "3."		OOT, FEE		,	ADDIT. FEE	<u> </u>		
		The Wighest Nur	nber Previously Pai	छ FOF (1008±0	r independ	eng is the	a nignesi humber	TOUT	2 971 TR 84	· Andhessa 00	x 61 CC				